



## Sawnee Electric Membership Foundation 2026 Youth Scholarship Program

Name \_\_\_\_\_

Address \_\_\_\_\_

Email Address \_\_\_\_\_

Phone No. \_\_\_\_\_

Sawnee EMC Account No. \_\_\_\_\_

Home Address (street/city/state/zip code) \_\_\_\_\_

Parents' Names \_\_\_\_\_

Father's Occupation \_\_\_\_\_

Phone Number \_\_\_\_\_

Mother's Occupation \_\_\_\_\_

Phone Number \_\_\_\_\_

Are you related to a Sawnee EMC employee, Sawnee EMC / Foundation Director or CATF member? \_\_\_\_\_

Please save this application form and attach it, via email or mail, along with the items listed below:

1. **High School Resume** to include hobbies, school activities/clubs, honors, awards, community service, extracurricular activities, sports, work experience/internships.
2. **Essay** – Please answer the following questions in essay format. Essays should be no more than one (1) page each, typed with a font size no smaller than 12 point and double-spaced. Please include your name on the top right-hand corner. Note, you will need to submit both essays below, each on its own page.
  - a. Please tell us about yourself and your family. Include how you plan to fund your college education and how this scholarship will assist you. State any personal or family circumstances affecting your need for financial assistance, if any.
  - b. Tell us about a time you failed. What did you learn from that experience?
3. **High School Transcript** (can be unofficial or official)
4. **Copy of SAT or ACT score**. This can be printed from their website.
5. **Two (2) letters of recommendation** to explain why you should be considered a scholarship recipient. Letters of recommendation from relatives will **not** be accepted.

I certify that I am a high school senior, and the information reported on this application is correct to the best of my knowledge.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

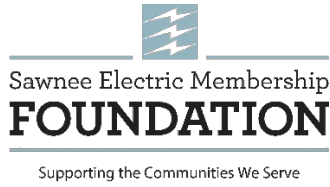
\_\_\_\_\_  
Parent/Legal Guardian Signature

\_\_\_\_\_  
Date

Return completed applications to:

Only submit via mail or email

Sawnee Electric Membership Foundation  
ATTN: Marketing Department – Youth Scholarship Program  
P.O. Box 1174  
Cumming, GA 30028  
Email: [scholarships@sawnee.coop](mailto:scholarships@sawnee.coop)



**Note:** The completed application and all other required documents must be received no later than 5:00 pm on Friday, January 9, 2026. Applications received after this deadline or applications that are incomplete as of this deadline will not be considered. The decision of scholarship recipients by the judges is final.

**Please complete the following:**

**List all financial assistance for which you have applied or will receive from another source:**

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**List any scholarship (whether partial or full) you have already received:**

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**Top Three (3) College or University Choices:**

1. 

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2. 

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3. 

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**Information about college or university your plan to attend (if known at this time):**

**School Name** 

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**Financial Aid Contact Person** 

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**Mailing Address** 

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**Phone Number** 

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**Student ID, if available** 

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